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## MULTIPLE DEPENDENT CLAIM O06\ **FEE CALCULATION SHEET** Applicant(s) Substitute for Form PTO-1360 (For use with Form PTO/SB/06) \* May be used for additional claims or amendments CLAIMS AS FILED AFTER FIRST AFTER SECOND AMENDMENT AMENDMENT Indep Depend Indep Depend Indep Depend Indep Depend Indep Depend Indep Depend 24 Total Total Indep Indep Total Total

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